



Marine Corps League
Two-Eagles Detachment (#842)
 Southwest Metro
 PO Box 302
 Savage, MN 55378
www.TwoEagles-MCL.org / Incoming@TwoEagles-MCL.org



MOS Mentoring Program

Participant Information Sheet

Complete this form electronically, save and forward to the Detachment Commandant (Commandant@TwoEagles-MCL.org) or, print the form and complete it manually and give it to the Commandant at the next meeting.

Name: _____

Contact Information:

(provide the contact information you would prefer the Poolee or Marine to use for their initial contact with you)

Address: _____

City: _____ St: MN Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

What was your MOS?

Number: _____ MOS Title: _____

What did you enjoy most about your MOS?

Has any of your MOS training carried-over into civilian life? *If so, describe what and how:*

What would you recommend to a new Marine starting-out?

Would it be OK for a new Marine/Poolee to contact you? Yes No

Are there any limits (times/days) when it is better or not-so-good to contact you: